

1003 U.S. PTO
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PTO/SB/05 (4/03)

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 00P7583US01; 60,426-258
		First Inventor or Application Identifier McLean
		Title Offline Active Control of Automotive Noise
		Express Mail Label No. EL668872815US

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 12] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4]</p> <p>4. Oath or Declaration [Total Pages]</p> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). 		
<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies 		
ACCOMPANYING APPLICATION PARTS		
<p>7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>8. <input type="checkbox"/> 37 C.F.R. § 3 73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney</p> <p>9. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <ul style="list-style-type: none"> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired 13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 14. <input type="checkbox"/> Other: 		
<p>NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</p>		

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment.

 Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

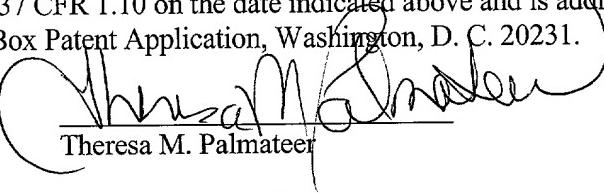
<input type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here)			<input type="checkbox"/> Correspondence address below
Name	Elsa Keller Siemens Corporation				or
Address	186 Wood Avenue South				
City	Iiselin	State	NJ	Zip Code	08830
Country	United States	Telephone	732-321-3024	Fax	732-321-3014

Name (Print/Type)	Anthony P. Cho	Registration No. (Attorney/Agent)	47,209
Signature			Date 2/8/01

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CERTIFICATE OF MAILING BY "EXPRESS MAIL"

"EXPRESS MAIL" Mailing Label No. EL668872815US Date of Deposit February 8, 2001 I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner of Patents, Box Patent Application, Washington, D. C. 20231.



The signature is handwritten in black ink, appearing to read "Theresa M. Palmateer". It is enclosed within a large, roughly circular outline.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 710; \$40

Complete if Known

Application Number	Herewith
Filing Date	Herewith
First Named Inventor	McLean
Examiner Name	
Group Art Unit	
Attorney Docket No.	00P7583US01; 60,426-258

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	
Deposit Account Name	

Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

Applicant claims small entity status.
See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920*	112 920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 55 Extension for reply within first month	
116	390	216 195 Extension for reply within second month	
117	890	217 445 Extension for reply within third month	
118	1,390	218 695 Extension for reply within fourth month	
128	1,890	228 945 Extension for reply within fifth month	
119	310	219 155 Notice of Appeal	
120	310	220 155 Filing a brief in support of an appeal	
121	270	221 135 Request for oral hearing	
138	1,510	138 1,510 Petition to institute a public use proceeding	
140	110	240 55 Petition to revive - unavoidable	
141	1,240	241 620 Petition to revive - unintentional	
142	1,240	242 620 Utility issue fee (or reissue)	
143	440	243 220 Design issue fee	
144	600	244 300 Plant issue fee	
122	130	122 130 Petitions to the Commissioner	
123	50	123 50 Petitions related to provisional applications	
126	240	126 240 Submission of Information Disclosure Stmt	
581	40	581 40 Recording each patent assignment per property (times number of properties)	40.00
146	710	246 355 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249 355 For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279 355 Request for Continued Examination (RCE)	
169	900	169 900 Request for expedited examination of a design application	
Other fee (specify) _____			

SUBTOTAL (1) (\$ 710.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	-20** = 0	X _____	= _____
3	-3** = 0	X _____	= _____
Multiple Dependent			= _____

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	80	202 40 Independent claims in excess of 3
104	270	204 135 Multiple dependent claim, if not paid
109	80	209 40 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0

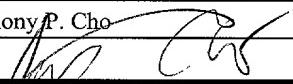
**or number previously paid, if greater; For Reissues, see above

Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Anthony P. Cho	Registration No. (Attorney/Agent)	47,209	Telephone	248-988-8360
Signature				Date	2/8/01

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